

FILED

08 FEB 19 PM 1:18

CLERK OF DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

NC
G. Godfrey Plaintiff,

vs.

State of California Defendant.

CASE NO. CV 08 00638 WHA

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, G. Godfrey, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 The never had a job due to my seizure
 5 condition

6
 7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ___ No ☒
 10 self employment

11 b. Income from stocks, bonds, Yes ___ No ☒
 12 or royalties?

13 c. Rent payments? Yes ___ No ☒

14 d. Pensions, annuities, or Yes ___ No ☒
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes ___ No ☒
 17 Social Security or other govern-
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 N/A

22
 23 3. Are you married? Yes ___ No ☒

24 Spouse's Full Name: _____

25 Spouse's Place of Employment: _____

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ _____ Net \$ _____

28 4. a. List amount you contribute to your spouse's support: \$ _____

N/A

28. _____ \$ _____ \$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to
2 whom they are payable. Do not include account numbers.)

3 I have const debts
4 _____

5 10. Does the complaint which you are seeking to file raise claims that have been presented
6 in other lawsuits? Yes _____ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8 which they were filed.
9 _____
10 _____

11 I consent to prison officials withdrawing from my trust account and paying to the court
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and
14 understand that a false statement herein may result in the dismissal of my claims.

15
16 2-14-08

17 DATE

15
16 LaBrel Hoffman

17 SIGNATURE OF APPLICANT

Case Number: CV 08 001638

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of N/A for the last six months

C.T.F. Soledad [prisoner name]
[name of institution] where (s)he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ N/A and the average balance in the prisoner's account each month for the most recent 6-month period was \$ N/A.

Dated: _____

[Authorized officer of the institution]